NE	PART B - FEE	(S) TRANSMITTAL		
Complete and send this figure, togeth		Commissioner P.O. Box 1450 Alexandria, Vi or Fax (571) 273-2885	for Patents rginia 22313-1450	
INSTRUCTIONS: This form special be used appropriate All further correspondence includindicated unless companions of directed of maintenance les maintenances appropriate appress of the contractions.	for transmitting the ISSUE FEE a ing the Patent, advance orders and herwise in Block 1, by (a) specifyi	nd PUBLICATION FEE (if reconstitution of maintenance focusing a new correspondence address	uired). Blocks 1 through 5 will be mailed to the currents; and/or (b) indicating a se	should be completed where nt correspondence address as parate "FEE ADDRESS" for
COLLEGE OF EACH ADVICES (NOTE: USE E	lock   (or any change of address)	Note: A conflicate of Fee(s) Transmittal, I papers. Each addition	of mailing can only be used his certificate cannot be used and paper, such as an assignr	for domestic mailings of the d for any other accompanying ment or formal drawing, must
PFIZER, INC. 201 TABOR ROAD MORRIS PLAINS, NJ 07950		C	ertificate of Mailing of Trac	
02/08/2006 TBESHAH2 00000065 230455 098	340257		ne Avenoso	(Depositor's name)
01 FC:1501 1400.00 DA		Christe	io. avenus	(Signature)
02 FC:1504 300.00 DA		2/7/	2006	(Date)
APPLICATION NO. FILING DATE	FIRST NAM	MED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/840,257 04/23/2001	Robe	т А. Ѕсоп	6512-11EJF	7160
TITLE OF INVENTION: POLYVINYL ALCOH	IOL COMPOSITIONS			
APPLN. TYPE SMALL ENITE	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional NO	\$1400	\$300	\$1700	04/25/2006
EXAMINER	ART UNIT	CLASS-SUBCLASS	]	
HON, SOW FUN  1. Change of correspondence address or indication	1772	428-035700		
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  Tree Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively.  (2) the name of a single firm (having as a member a registered attorney or agents of up to 2 registered attorneys or agents. If no name is listed, no name will be printed.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)				
PLEASE NOTE: Unless an easignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.				
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)				
Warner-Lambert Company Morris Plains, New Jersey 07950				
Please check the appropriate assignce categories (will not be printed on the patent):				
4a. The following fee(s) are enclosed:  4b. Payment of Fee(s):  A shock in the amount of the fee(s) in present of the fee				
XPssue Foc  A check in the amount of the fec(s) is enclosed.  X Publication Fee (No small entity discount permitted)  Payment by credit card. Form PTO-2038 is attached.				
Advance Order - # of Copies XX The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 23-0455 (enclose an extra copy of this form).				
5. Change in Entity Status (from status indicated  a. Applicant claims SMALL ENTITY status	above)			
The Director of the USPTO is requested to apply it NOTE: The Issue Fee and Publication Fee (if requi interest as shown by the records of the United Supre		icant is no longer claiming SMAI  (my) or to re-apply any previously  no other than the applicant; a regul	L ENTITY status. See 37 CI paid issue for to the application of the attorney or agent; or the	FR 1.27(g)(2). tion identified above, c assigner or other party in
Authorized Signature	main		eb.7, 2006	
Typed or printed name Rosemary	M. Miano	Registration i	No. 29,674	
This collection of information is required by 37 CF an application. Confidentiality is governed by 35 U submitting the completed application form to the U this form and/or suggestions for reducing this burd Box 1450, Alexandria, Virginia 22313-1450. DO Mckandria, Virginia 22313-1450.	R 1.311. The information is required J.S.C. 122 and 37 CFR 1.14. This co ISPTO. Time will vary depending user, should be sent to the Chief Infor NOT SEND FEES OR COMPLETE	to obtain or retain a benefit by the discrimination is estimated to take 12 m pon the individual case. Any commation Officer, U.S. Patent and 10 FORMS TO THIS ADDRESS.	te public which is to file (and immes to complete, including numerts on the amount of tir (rademark Office, U.S. Depa. SEND TO: Commissioner for	by the USPTO to process) g gathering, preparing, and ue you require to complete runcut of Commerce, P.O. or Paunts, P.O. Box 1450.
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.				
PTOL-85 (Rev. 07/05) Approved for use through 04/30/2007. OMB 0651-0033 U.S. Parent and Trademark Office, U.S. DEPARTMENT OF COMMERCE				

+9733853117

03:33pm From-INTELLECTUAL PROPERTY

02-07-06

T-496 P.001/001 F-807